

## **SAND abstract No. 146 from the BEACH program 2009–10**

### **Subject: Antiplatelet medication and gastrointestinal problems in general practice patients**

**Organisations supporting this study:** AstraZeneca Pty Ltd

**Issues:** Prevalence of patients at risk of cardiovascular disease. For those at risk: current antiplatelet medications and daily dose; proportion with gastrointestinal (GI) problems and medications prescribed for those problems; the pattern of use of proton pump inhibitors (PPI); and timing of initiation of antiplatelet and PPI use.

**Sample:** 3,298 respondents from 111 GPs; data collection period: 05/05/2009–08/06/2009.

**Method:** Detailed in the paper entitled *SAND method 2009–10* at: [www.fmrc.org.au/publications/SAND\\_abstracts.htm](http://www.fmrc.org.au/publications/SAND_abstracts.htm).

### **Summary of results**

Age and sex of patient were recorded at 3,277 encounters. The age distribution did not differ from all 2007–08 BEACH encounters. Sex distribution was significantly different: 37.6% (95% CI: 34.6–40.5) of encounters were with male patients, a significantly lower proportion than in total 2007–08 BEACH encounters (42.9%, 95% CI: 42.1–43.7).

GPs determined that 1,117 (33.9%) patients were at risk of cardiovascular disease, the proportion rising significantly with age. Among patients aged 25–44 years, 10.6% (95% CI: 7.9–13.3) were at risk, while among those aged 75 years and over, 76.9% (95% CI: 72.0–81.9) were at risk. There was no statistically significant difference between the sexes.

Information on antiplatelet use was available for 1,078 at risk patients. A total of 575 medications were recorded (multiple responses were allowed). Half of the patients (50.5%, 95% CI: 46.0–54.9) took at least one antiplatelet medication: 475 patients (44.1%) taking aspirin, 8.2% taking clopidogrel, and 1.1% taking an aspirin/dipyridamole combination.

Of 1,089 at risk respondents with GI problem data, 437 (40.1%) had at least one GI problem: 31.8% had gastro-oesophageal reflux disease (GORD), 6.5% had dyspepsia, 2.3% had peptic ulcer disease, and 4.5% had other GI problems/symptoms.

Of 430 respondents with a GI problem and medication data, 393 (91.4%) were taking a medication for their problems, and 366 (89.5%) of these were taking a PPI (80.3% of these as a continuous medication). Of a total of 410 medications for GI problems, esomeprazole accounted for 31.2%, pantoprazole for 21.7% and omeprazole 20.0%.

Of the 475 patients currently taking aspirin as an antiplatelet (either alone or with clopidogrel), GI problem status was recorded for 469. Of these, 202 (43.1%) had at least one GI problem: 169 (36.0%) had GORD, 5.5% had dyspepsia, 2.4% had peptic ulcer disease, and 3.2% had other GI problems/symptoms.

Of 167 at-risk patients with GORD and on antiplatelet aspirin, 156 (93.4%) were taking a PPI, and for 122 of these patients (80.3%), the regimen was continuous medication. For 114 at risk patients with GORD and on antiplatelet aspirin, timing of initiation of antiplatelet and PPI use was known: 54.4% started on a PPI first and 45.6% started on antiplatelet aspirin first.

*Correspondence to: Graeme Miller, AGPSCC*

# PLEASE READ CAREFULLY

The shaded section of the following forms asks questions about **ANTIPLATELET MEDICATIONS AND GASTROINTESTINAL PROBLEMS**.  
 You may tear out this page as a guide to completing the following section of forms.

## INSTRUCTIONS

Please answer the following questions for **ALL** of the **next 30 PATIENTS** in the order in which the patients are seen.

Please **DO NOT** select patients to suit the topic being investigated.

### Cardiovascular risk

In your clinical opinion, please advise whether this patient is at cardiovascular risk.

If 'no', please **end the questions here** for this patient.

### Antiplatelet medication

In the space provided please write the **name and form** of the **antiplatelet medication**, and the regimen (i.e. **strength, dose and frequency**) of the medication(s) the patient is currently taking.

Please include any aspirin combination medications if taken for antiplatelet purposes.

### Medications for GI problems

Please write the **name and form** of the **current medication(s)** taken by this patient for their GI problems. (Please ask the patient if necessary).

Please also indicate the regimen (i.e. **strength, dose and frequency**) of the medication(s).

If the patient is **not currently taking a medication** for their GI problems please tick the box labelled '**No medications for GI problem**'.

### Antiplatelet medication use

Please ask the patient whether they currently take **antiplatelet medication** (e.g. **aspirin, clopidogrel**).

Note: these questions relate to antiplatelet medication use. They do not refer to other anticoagulant medications (e.g. warfarin).

If '**none of the above**', please continue to **part 2** of the form.

### Gastrointestinal (GI) problems

Please use the tick boxes to advise whether this patient has **any of the listed GI problems**.

If the patient does not have a GI problem, please **end the questions here** for this patient.

### Use of proton pump inhibitors (PPIs)

If the patient uses a PPI please ask the patient how often they take the PPI: **every day (as a continuous medication), most days, weekly, monthly or less frequently**.

If the patient does not take a PPI for the management of their GI problems please tick '**no PPI**' and end the questions here.

Please also indicate whether the **PPI was started before commencing antiplatelet** medication. If the patient is **not simultaneously on PPI and antiplatelet** medication tick '**No antiplatelet**'.

<p><b>In your clinical opinion, is this patient at risk of cardiovascular disease?</b></p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No → <b>End questions</b></p>	<p><b>Does this patient currently take:</b></p> <p><input type="checkbox"/> Aspirin (as an antiplatelet)</p> <p><input type="checkbox"/> Clopidogrel</p> <p><input type="checkbox"/> Other antiplatelet</p> <p><input type="checkbox"/> None of the above → <b>Go to PART 2</b></p>	<p><b>Current antiplatelet medication(s):</b></p> <table border="1"> <thead> <tr> <th>Name &amp; Form</th> <th>Strength</th> <th>Dose</th> <th>Frequency</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p><i>(Please include aspirin combinations if taken as an antiplatelet)</i></p>	Name & Form	Strength	Dose	Frequency													<p><b>PART 2:</b></p> <p><b>Does this patient have:</b></p> <p><input type="checkbox"/> GORD</p> <p><input type="checkbox"/> Dyspepsia</p> <p><input type="checkbox"/> Peptic ulcer disease</p> <p><input type="checkbox"/> Other GI problems/symptoms</p> <p><input type="checkbox"/> None of the above → <b>End questions</b></p>	<p><b>Current medication(s) for GI problem(s):</b></p> <table border="1"> <thead> <tr> <th>Name &amp; Form</th> <th>Strength</th> <th>Dose</th> <th>Frequency</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p><input type="checkbox"/> No medications for GI problem(s)</p>	Name & Form	Strength	Dose	Frequency													<p><b>If PPI is used, ask the pt how often it is taken:</b></p> <p><input type="checkbox"/> No PPI → <b>End Qs</b></p> <p><input type="checkbox"/> every day (as a continuous med)    <input type="checkbox"/> weekly / fortnightly</p> <p><input type="checkbox"/> most days    <input type="checkbox"/> monthly or less</p> <p><b>Was PPI started before antiplatelet?</b></p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> Don't know</p> <p><input type="checkbox"/> No    <input type="checkbox"/> No antiplatelet</p>
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